



## IN THE UNITED STATES

## PATENT AND TRADEMARK OFFICE

APPLICANT(S): J. Elon Graves, Malcolm J. Northcott and J. Christopher Shelton  
APPLICATION NO.: 10/688,575  
FILING DATE: October 16, 2003  
TITLE: Combined Wavefront Sensor and Data Detector for a Free Space  
Optical Communications System with Adaptive Optics  
EXAMINER: Not yet assigned  
GROUP ART UNIT: 2633  
ATTY. DKT. NO.: 23236-07284

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

Dated: OCT 20, 2005

By: 

Michael W. Farn, Reg. No. 41,015

COMMISSIONER FOR PATENTS  
P.O. BOX 1450  
ALEXANDRIA, VA 22313-1450

## STATUS REQUEST

SIR:

PAIR and our file for the subject application reveal that there has been no action on this application since the filing of our Information Disclosure Statement in August 2004.

Please inform the undersigned, at the below stated address, of the status of this application.

Respectfully submitted,  
J. ELON GRAVES et al.

Dated: OCT 20, 2005

By: 

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|--|-----------------------|------------------------|-------------|
| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence during pendency of filed application)</i> | Application Number    | 10/688,575             |             |
|  | Filing Date           | October 16, 2003       |             |
|  | First Named Inventor  | J. Elon Graves         |             |
|  | Group Art Unit Number | 2633                   |             |
|  | Examiner Name         | Not yet assigned       |             |
| Total Number of Pages in This Submission   | 2                     | Attorney Docket Number | 23236-07284 |

| ENCLOSURES (check all that apply)   |   |
|---|---|
| <input type="checkbox"/> Fee Transmittal Form (in duplicate)<br><input type="checkbox"/> Check Enclosed                           | <input type="checkbox"/> Issue Fee Transmittal  |
| <input checked="" type="checkbox"/> Return Receipt Postcard   | <input type="checkbox"/> Letter to Chief Draftsperson   |
| <input type="checkbox"/> Response to Notice to File Missing Parts   | <input type="checkbox"/> Formal Drawing(s):<br>[ ] Sheet(s) of Figure(s) [ ]                  |
| <input type="checkbox"/> Assignment & Recordation Cover Sheet   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences           |
| <input type="checkbox"/> Declaration  | <input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> Power of Attorney  | <input type="checkbox"/> Certified Copy of Priority Document(s)                               |
| <input type="checkbox"/> Application Data Sheet   | <input type="checkbox"/> After Allowance Communication to Group                               |
| <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A<br><input type="checkbox"/> Copies of IDS Cited References | <input type="checkbox"/>  |
| <input type="checkbox"/> Request for Corrected Filing Receipt   | <input type="checkbox"/>  |
| <input type="checkbox"/> Request for Correction of Recorded Assignment  | <input type="checkbox"/>  |
| <input type="checkbox"/> Amendment/Response: [ ] Page(s)<br><input type="checkbox"/> After Final                                  | <input type="checkbox"/>  |
| <input checked="" type="checkbox"/> Status Request  | <input type="checkbox"/>  |
| <input type="checkbox"/> Revocation and Substitute Power of Attorney  | <input type="checkbox"/>  |
| REMARKS:  |   |

| SIGNATURE OF ATTORNEY OR AGENT |                                  |        |               |
|--------------------------------|----------------------------------|--------|---------------|
| Signature:                     |                                  |        |               |
| Attorney/Reg. No.:             | Michael W. Farn, Reg. No. 41,015 | Dated: | OCT. 20, 2005 |

| CERTIFICATE OF MAILING  |                 |        |               |
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| Signature:  |                 |        |               |
| Typed or Printed Name:  | Michael W. Farn | Dated: | OCT. 20, 2005 |
| Express Mail Mailing Number (optional):   |                 |        |               |